Complete and send	11:45AM GLA	XO WELLCOME	fee(s), to: <u>N</u>	<u>Mail</u> Mail St Commi P.O. Bo	op ISSUE ssioner fo x 1450 dria, Virg	NO. 0153 FEE r Patents inia 22313-1450	P. 2	/	
INSTRUCTIONS This for appropriate Will future con indicated unless corrocted maintenance fee notification	rm should be used for transpondence including the below or directed otherwise	nsmitting the ISSU Patent, advance or in Block 1, by (a				ired). Blocks 1 through 5 vill be mailed to the curren and/or (b) indicating a ser	should be comple t correspondence parate "FEE ADD)	ted where address as RESS" for	
CURRENT CORRESPONDENCE ADDRESS (Notic: Uso Block I for any change of address) 23347 7590 05/02/2006 GLAXOSMITHKLINE CORPORATE INTELLECTUAL PROPERTY, MAI B475 FIVE MOORE DR., PO BOX 13398 RESEARCH TRIANGLE PARK, NC 27709-3398				Note: A c Fec(s) Trs papers. Es have its or I hereby c States Pos addressed transmitte Mar	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being doposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FBE address above, or being facsimile transmitted to the USPTO (571) 273-2865, on the date indicated below. Marjorie J. Pfeiffer. (Depositor's name) United 19, 2006 (Signstore) June 19, 2006				
APPLICATION NO.	' FILING DATE		PIRST NAMED	RST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATIO	N NO.	
09/889,751 TITLE OF INVENTION: IN	07/20/2001 WHALATION DEVICE SMALL ENTITY	FOR the second	Paul Kenne		85 E	PG3604USW 19/2006 CNGUYEN1 0000 C:1501 1400.00 C:8001 12.00	DA	09889751	
L		ISSUE FI		\$0 PUBLICATION FEE		TOTAL FEE(S) DOD	DATE DUE		
nonprovisional NO			\$1400			\$1400	08/02/200	6	
EXAMINER MITCHELL, TEENA KAY		3743	T	CLASS-SUBC	LASS				
	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) dams will appear on the patent. If an assignee is identified below, the document has been filed for T a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
GLAXO GROUP LIMITED Greenford, England									
Please check the appropriate	assignee category or categor	ics (will not be pri	ated on the pate	nt): 🔲 Indivi	dual 🖾 Con	poration or other private gre	oup ontity 🔲 Gov	cmment	
4a. The following fee(s) are enclosed: ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted)				Payment of Fcc(s): A check in the amount of the fcc(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fce(s), or credit any overpayment, to Deposit Account Number 07-1392 (enclose an extra copy of this form).					
5. Change in Entity Status (a. Applicant ctaims SM The Director of the USPTO is NOTE: The Issue Fee and Puinterest as shown by the recor	IALL ENTITY status. Sec 3	7 CFR 1.27.	□ b. Applicant	is no longer clai	ming SMAL	L ENTITY status. Sec 37 CF	FR 1.27(g)(2).	-	
Authorized Signature	Office.			29 - 20cb	N				
Typed or printed name	Registration No. 39,009								
This collection of information an application. Confidentiality submitting the completed applitis form and/or suggestions in Box 1450, Alexandria, Virgina Alexandria, Virginia 22313-14. Under the Paperwork Reduction	for reducing this burden, sho ia 22313-1450. DO NOT S 450.	ould be sent to the END FEES OR CO	Chief Informati OMPLETED FO	btain of relain a nion is estimated the individual or on Officer, U.S. DRMS TO THIS	benefit by the to take 12 mi ase. Any con Patent and T ADDRESS.	e public which is to file (and inutes to complete, including ments on the amount of tin rademark Office, U.S. Depa SEND TO: Commissioner f	rement of Commer or Patents, P.O. Bo	process) ing, and complete ree, P.O. ox 1450,	





To BOX ISSUE FEE

Company USPTO

Fax (571) 273-2885

From Marjorie J. Pfeiffer

Tel 1-919-483-9038; Facsimile: 1-919-483-7988

E-mail marjorie.j.pfeiffer@gsk.com

Date June 29, 2006 Pages including cover 3

Subject Fee(s) Transmittal – Appl. No. 09/889,751

GlaxoSmithKline PO Box 13398 Five Moore Drive Research Triangle Park North Carolina 27709

Tel: 919 483 2100 www.gsk.com

Re:

Fee(s) Transmittal

Application of Paul Kenneth RAND et al.

U.S. Serial No.: 09/889,751; Filed: July 20, 2001

Date of Mailing "Notice of Allowance and Fees Due": May 2, 2006

Confirmation No. 8846
Title: Inhalation Device

Attorney Docket No. PG3604USw

Attached:

 Fee(s) Transmittal (Part B), in duplicate with Certificate of Transmission (37 CFR 1.8(a))

The information contained in these documents is confidential and may also be privileged and is intended for the exclusive use of the addressee designated above. If you are not the intended recipient or the employee or agent responsible to deliver it to the intended recipient, any disclosure, reproduction, distribution, or any other dissemination or use of this communication is strictly prohibited. If you have received this transmission in error please contact us immediately by telephone so that we can arrange for its return.